

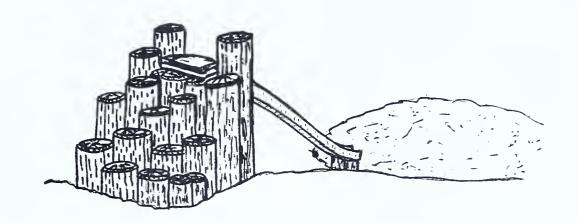
THE GRAND STAND

VOLUME I, NO. 5

GOVERNOR'S COMMITTEE FOR SERVICES TO THE HANDICAPPED

FEBRUARY 1976

POST LADDER SLIDE



POSTS ARE 10" TO 14" IN DIAMETER (PEELED). TOP EDGE OF POSTS ARE ROUNDED OFF. HEIGHTS RANGE FROM 6" TO 48". SAND FILLED BETWEEN POSTS. SAND PILE AT END OF SLIDE. POSTS SET TWO FEET INTO GROUND.

PLAYGROUND EQUIPMENT FOR THE PHYSICALLY HANDICAPPED

Richard A. Fry
Superintendent
Butler County Parks & Grounds

The Butler County Parks and Grounds main operation is a 408 acre recreational park which is about one fourth developed at this time. We have had quite a concern for the handicapped and their inability to use regular play equipment. We feel the handicapped, as well as the non-handicapped, should both use the same play equipment at the same time in the same play area. After some thorough research about five years ago, we could not find equipment geared to both, to be used

outdoors in a regular play area, we decided to use regular pieces of play equipment and design and have equipment built to meet these needs.

We have come up with some very useful playground equipment so far and hope to further our desires this winter. We now have installed a post ladder slide, elevated sand box and the chinning bar in our park. We have not had anything patented as our only concern is for the handicapped and not our own monetary return. We are willing to give our plans to any non-profit group that would be interested.

For further information contact:
Richard A. Fry
Superintendent
Butler County Parks & Grounds
182 Alameda Road
Butler, Pa. 16001

INDUSTRIES LTD. – SHIPPENSBURG STATE COLLEGE TRAINING PROGRAM

Gilmore B. Seavers President Shippensburg State College

Sheltered workshops are constantly striving to provide handicapped individuals with the best vocational training possible. Efforts to provide specialized training are often hindered by the workshops inability to simulate the many diversified occupations available in the community due to limitations of space and funding. Even when specific training is available, the employee often finds the transition from sheltered to competitive employment an insuperable step.

Industries Ltd., the sheltered workshop division of the Cumberland-Perry Association for Retarded Citizens, and Shippensburg State College are exploring a program which may very well provide both specialized vocational training and serve as a stepping stone between sheltered and competitive employment.

The program, initiated by SSC as part of its continuing education program, is directed toward providing handicapped individuals with the opportunity to obtain valuable on-the-job training by working alongside the college's service staff. The training is accomplished by having a trainee individually assigned to a SSC staff member, with the particular department head as overseer. This one-to-one relationship enables the trainee to learn

more quickly than would be possible in a group situation.

A college, being a small community in itself, represents many occupational areas found in the competitive employment market. (i.e., Carpentry, plumbing, warehousing, grounds keeping, custodial, office machine operation, and vehicle maintenance). The move from sheltered to competitive employment is no longer impossible. It is a realistic goal. Harry Benion, Assistant to the Director of Public Relations at SSC has commented that the "program is working well from what I've seen". The Service Staff Union which is represented by AFSCME, the Local 2354 has also been very supportive of the program.

Both Robert Valentine, Director of Industries, LTD. and Robert Jamieson, Director of Administrative Services for Shippensburg College, are hopeful that the program can be continued on a long-term basis.

While the concept of vocational training is not new, the use of college facilities and services staff's vocational expertise is a recent innovation.

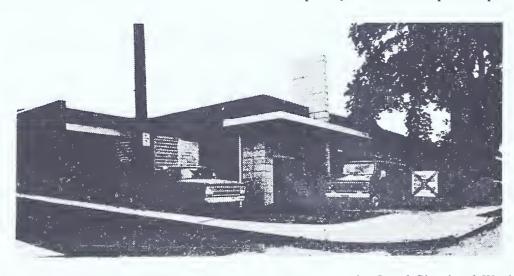
Electric Company and was honored by the Industrial Engineering Magazine. Most work performed at Good Shepherd Workshop is done on a sub-contract basis with such companies as General Electric, Western Electric Company, Mack Trucks, Inc., Air Products and Chemicals and includes such diversities as micro-filming, packaging, tool repair, electrical assemblies, mailings, collating, and a variety of machine shop operations.

Wheelchair repair is a service we provide to hospitals, nursing homes and individuals. For anyone interested in our repair service we specialize in Everest and Jennings but will give estimates on any other model.

During the past year Good Shepherd Workshop began to manufacture a collection of jewelry items and to market them via gift shops and demonstrations. Assembly of the jewelry encourages the client to use his imaginative capabilities.

The program has proved quite successful.

With an eye to helping other workshops provide the same challenge and create a completely new concept in providing



GOOD SHEPHERD WORKSHOP

Thomas R. Stenhouse
Director of Operations
Vocational Rehabilitation Center
Allentown, Pennsylvania

The Good Shepherd Workshop opened in 1958 giving sheltered employment to approximately 12 handicapped persons. Today it has grown to approximately 140 handicapped persons with a staff specialized in vocational rehabilitation, job placement, procurement, work and training supervisors, work activities for qualified needs. The Good Shepherd Workshop is accredited by the Commission on Accreditation of Rehabilitation Facilities, Inc. (CARF) and has recently been named vendor of the year by General

creative work, Good Shepherd Workshop would be willing to discuss the possibility of setting up a Jewelry Program in your workshop. To obtain more information on this program, write Thomas R. Stenhouse, Director of Operations, Good Shepherd Workshop, Jewelry Division, 820 S. 5th Street, Allentown, Pa. 18103, or call area code 215-433-3273.

NEW TYPE SHUNT OFFERS PROMISES

Reprinted from PCMR Message, August 1975-41 HEW, Washington, D.C.

A new operation to deal with hydrocephalus, a common cause of mental

retardation, has been successfully used on three infants at Children's Hospital, Washington, D.C.

Like earlier operations, it uses a catheter to shunt fluid from brain to heart or abdomen. But in addition, surgeons now implant a plastic pouch containing eight more inches of coiled catheter. This uncoils and grows in length with the child, so that further operations are unnecessary.

The method had previously been used in several thousand children with cardiac pacemakers.

PENNSYLVANIA DEPARTMENT OF HEALTH STUDIES NEED OF SEVERELY PHYSICALLY HANDICAPPED MENTALLY ALERT PERSONS

By: Mr. John Gamaldi, Director— Division of Social Work Pa. Department of Health

There is information available from several social service agencies in Pennsylvania which indicates the existence of a group of people who by virtue of illness, accident or birth, are victims of a severe permanent crippling physical condition which will not permit their physical restoration to a full and productive existence. As a result of their disability these people are dependent upon others for their daily care and development. Too often the care they receive is at best custodial rather than rehabilitative. While many in this severely disabled group are mentally retarded, a good portion possess a near normal or above normal mental capacity which, because of their physical disability and the custodial nature of the care they receive, remains unstimulated and underutilized and these factors compound the dehumanized existence that their physical disability compels.

In spite of the fact that services which can benefit the handicapped are found in almost every major department of state government--Health, Welfare, Education, Labor, etc.-- and in many private non-profit agencies, such as Easter Seal Society; there are gaps in service because certain needed services do not fall within any one agency's responsibility. Because of the nature of their disabling condition, severely physically disabled but mentally

PIONEERING VOCATION EDUCATION FOR THE PHYSICALLY HANDICAPPED

James L. McKenna, Principal Pioneer Center for Exceptional Children Pittsburgh, Pa.

Pioneer Center has, at the present time, an ongoing vocational program on a somewhat limited basis, with plans for a more complete program to be started this year.

At the center of its program, Pioneer has the services of a full time Rehabilitation Counselor who counseling is directed toward the application of:

Individual and Group Counseling Techniques, Testing and Work Sample Evaluations.

Selected students are seen for individual counseling sessions on a scheduled basis. Group counseling sessions are provided once a week for an hour. Counseling areas include, but are not limited to:

- (1) Psychological adjustment to the limitations of disability
- (2) Physical, educational, and training requirements of vocational and occupation groups
- (3) Planning for pre-vocational and/or workshop programs
- (4) Planning for educational and/or vocational objectives

Testing includes vocational aptitude, vocational interest, and manual dexterity measurements by means of standardized tests. Some or all of these tests can be a c c o mplished, depending upon intellectual, educational, and physical limitations of the student. Students who have been accepted for services by the Bureau of Vocational Rehabilitation can receive a psychological-vocational test evaluation prior to leaving Pioneer.

A group of work samples were developed for the purpose of testing the student on a variety of basic work tasks found in workshop settings. Since these work samples are not standardized tests, no attempt is made to offer a quantitative rating.

(1) Student's ability to understand and follow verbal instructions, and if required instructions by demonstration:

- (2) Student's ability to identify and correct errors in performance:
- (3) Student's ability to fomulate an approach to the task (especially when modification is required due to physical disability:
- (4) Student's ability to develop pace in work activity:
- (5) Student's need for reinforcement and/or assistance during testing

Even though the work samples are not standardized as tests; each work sample is presented in a standard method. Data on performance is saved for future test performance comparison. Reports of testing and work sample evaluation are provided to the classroom teachers and other staff.

In order to fully develop our program we have established two main priorities:

- 1. Identifying Pioneer students who can receive their pre-vocational and vocational training in facilities outside the parent school.
- 2 Developing a vocational program at Pioneer for students who, because of their physical handicaps, cannot leave Pioneer.

In priority one, students must be identified as being able to be placed in skilled-centered vocational courses. These same students will receive a Singer Vocational Evaluation at the Singer Unit or at Pioneer Center. If the placement is a skill-centered one, there are obvious problems to be handled first.

For students who are placed in an exploratory vocational program the same type of problems must be worked out with one addition. That is the identification of the school or facility most accessible to our students.

Since individuals who have the potential for competitive employment will receive services outside of Pioneer, those students left at Pioneer are the ones who, because of intellectual and physical handicaps, could only function in a sheltered workshop environment. For these people, a simulated sheltered workshop class and Activities of Daily Living Program will be implemented.

The Home Economics teacher, occupational therapists, physical therapists, and home room teachers all do some Activities of Daily Living. All of these activities will now be centralized and

coordinated in the Home Leonomics section when it is converted into an ADL area.

Our present program and future planning are under the capable direction of Mr. David Ramsey, Rehabilitation Counselor at Pioneer and Dr. Charles Cohen from Project Liaison at the Pittsburgh Public Schools.

For further information contact
Mr. James L. McKenna
Principal
Pioneer Center for
Exceptional Children
Pittsburgh Public School
Dunster and LaMoine Streets
Pittsburgh. Pa. 15226

THE SIGNIFICANCE OF MOVEMENT EXPERIENCES FOR THE PRESCHOOL CHILD WITH ORTHOPEDIC DISABILITIES

By: Charles White
Department of Physical Education
University of Missouri – Columbia

One of the most significant trends in education is the renewed interest in early childhood education and the revival of programs with a strong orientation toward movement and sensory motor development (Piaget, 1952; Montessori, 1912). There is a growing realization that the effects of a stimulating environment can do much to enhance the development of subsequent cognitive, affective and psychomotor skills (Mills, 1972). Many believe that the foundation for all learning lies in the motor base developed during the first four years of life (Kephart, 1971; Delacato, 1966; Ayers, 1972; Ballinger, 1974; Auxter, 1971). It may therefore be hypothesized that if movement experiences can contribute significantly to the growth and development of normal children, it is of even greater importance for children with physical and mental disabilities because of the imposed limitations.

The interrelatedness of various aspects of development reveal that growth or improvement in one area may provide concomitant improvement in other

dimensions, i.e., improvement in mobility results in improvement in sociability, attitudes, leisure activities, etc. However, lack of growth or improvement in one area may be associated with regression in other dimensions. If we accept this psychological principle and the theory that the bases for higher ordered motor and cognitive learnings lie within a motor foundation, it becomes readily apparent how movement experiences can make significant contributions to preschoolers with orthopedic disabilities.

One of the greatest contributions movement experiences can provide for children is in the evolution of the self-concept. The self-concept is basically how the child perceives himself and how he interprets others perceptions and expectations of himself. A positive and realistic self-concept begins early in development and is rooted in motor behavior as the child learns to exert control over his environment. As this control matures, the child also matures in his understanding of himself and his capabilities. It is only with a complete understanding of himself that the child will learn to accept his disabilities and learn to function within his limitations (Wright, 1960).

HALF MILLION TO BENEFIT FROM INCREASE IN BLACK LUNG PAY

Reprinted from: Pennsylvania AFL-CIO News 101 Pine Street Harrisburg, Penna. 17101 November/75

More than 500,000 beneficiaries of the federal black lung program — including 173,300 coal miners — will have their payments increased by five per cent in November, according to James B. Cardwell, commissioner of Social Security.

In addition to coal miners, the benefits program — the most comprehensive occupational disease program in the nation — pays monthly benefits to 139,400 widows of coal miners who died from black lung disease, 2,700 other survivors

and 197,000 dependents of coal miners. With the increase in benefits, the program will pay out \$77.5 million monthly as compared with the previous monthly level of \$73.8 million.

The black lung benefits levels are tied by law to the pay of federal employees, who received a five per cent raise in October.

The payment in November to a coal miner disabled by coal worker's pneumoconiosis (the medical name of black lung) will be \$196.80 — up from \$184.40. The maximum black lung benefit payable when there are three or more dependents will be \$393.50 a month, increased from \$374,80. A coal miner or survivor with one dependent will get \$295.20 a month and, with two dependents, \$344.40.

Black lung benefits are payable under the Federal Coal Mine Health and Safety Act of 1969, which had the strong support of the United Mine Workers and served as a model for the Occupational Safety and Health Act of 1970. The Social Security Administration makes payments on all approved claims filed before July 1, 1973, and certain survivors' claims filed since then. The Labor Department is responsible for payments of most claims filed since July 1, 1973.

NEW PUBLICATIONS

Beginning with the Handicapped by Verna Hart, E.D. (Associate Professor, Coordinator, Program for Early Childhood Education for the Handicapped, University of Pittsburgh).

The author dedicates the book "To parents who are the child's first teachers and to teachers who are substitute parents." The point is well made that every child is entitled to a chance to succeed to his maximum ability level. A task analysis approach is used and teaching techniques are presented in the areas of self-care skills, motor training, adaptive behavior and language development. The author expresses the premise that all children can learn if the tasks are analyzed carefully

enough and presented according to the child's level of development.

Publisher:

Charles C. Thomas 301-327 East Lawrence Avenue Springfield, Illinois 62703 Price — \$6.95

Zoning for Family and Group Care Facilities by Daniel Lauber with Frank S. Bangs, Jr.

The Planning Advisory Service Report examines the rationale behind such facilities as halfway houses, group homes, and foster homes. The report surveys existing zoning practices and offers recommendations for a legal and sane zoning treatment of these uses. Most cities have overly restrictive zoning regulations which tend to prohibit these residential facilities from desirable residential districts. Zoning for Family and Group Care Facilities recommends that these facilities be allowed in all residential areas, including single family zones, subject only to specifie controls governing licensing, density and concentration of facilities.

Published by:

American Society of Planning Officials 1313 East Sixtieth Street Chicago, Illinois 60637 Price — \$6.00

Dictionary of American Idioms (Revised Edition), Maxine Tull Boatner, Ph.D, and John Edward Gates.

This dictionary has been designed as a supplement to existing school dictionaries. It is a dictionary for reference in understanding English phrases which cannot be understood from definitions of the separate words given in ordinary school dictionaries. The book has been planned for the use of students and teachers in the upper grades in schools for the deaf, but it is also useful for teachers and students of English as a foreign language.

Published by National Association of the Deaf, 814 Thayer Avenue, Silver Spring, Maryland 20910.

alert persons often fall hardest, in effect, between these gaps.

In many cases, the individual or his family has to seek out and piece together the various services needed, if they can be found, or do without. Many handicapped persons do not have the inner resources or knowledge to do this. Often, too, they find that they fall outside of a given program category and thereby are ineligible for its services, regardless of their need, or they have needs for which no program exists.

For these and other reasons the varied and complex needs of the physically handicapped, but mentally alert person often become the burden of the family and are not always met.

Utilizing funds provided to the Health Department by the Developmental Disabilities Council, the Division of Social Work in the Pennsylvania Health Department is currently undertaking a one year pilot study of this group of people with three basic objectives:

- 1. Determine just how many severely disabled mentally alert citizens there are in the Commonwealth. At present, there is no way of determining the size of this unique population.
- 2. Determine the service utilization patterns and describe unmet needs, if any, of this population.
- 3. Describe the services available for this group of persons from governmental and other private non-profit agencies.

Because of time and funding constraints the study has been limited in scope to five south central counties: Dauphin, Cumberland, Perry, York and Adams, with supplementary data from the city of Pittsburgh.

In this geographical area project staff has inventoried and interviewed all agencies that offer services which could be utilized by the severely physically disabled but mentally alert person.

From these agencies and all other sources, the staff is currently completing a comprehensive list of all severely physically disabled and mentally alert persons in the five county area and has begun in-depth interviews with a sample of this population in order to accomplish the second objective noted above.

By April 30, 1976 it is anticipated that

the project field work will be complete and the work of analyzing the data will begin.

The final product of this study will be a document describing the numbers and situations of this particular population. It will point out the services available to this group, their service needs and will make specific recommendations where there are gaps in services, needs for altering current programs, and needs for developing new or more coordinated program efforts.

For further information contact:
Mr. John Gamaldi
Director - Division of Social Work
Pa. Department of Health

FAMILY RESOURCE SERVICES PROGRAM PROVIDES A VARIETY OF OPPORTUNITIES FOR HANDICAPPED CITIZENS AND THEIR FAMILIES

By: Arthur R. Geisler, Chief
Division of Social &
Recreational Services
Office of Mental Retardation
Department of Public Welfare

Within the past few years, the Pennsylvania Department of Public Welfare through its Office of Mental Retardation has been developing a "Family Resource Service (FRS)" Program. The intent of the FRS Program is to reduce the need for institutionalization and promote deinstitutionalization by offering a variety of services/opportunities to the family which has a mentally retarded family member living within the home, as well as to mentally retarded persons who reside in community settings. This innovative program is operated at the local level by the County Mental Health and Mental Retardation System.

Through the Family Resource Services Program, mentally retarded citizens and their families in Pennsylvania may be provided with a variety of services/opportunities which include respite care, family aid, homemaker services, transportation, in-home therapy, family education/training, and recreation and leisure-time activities.

1. Respite Care makes a temporary residence available to a retarded person when his/her family or legal guardian with whom he/she is residing is experiencing stress, personal crisis, or a need for a vacation of sorts.

- 2. Family aid is a sitter-type service which is offered to parents who need a person to care for their retarded family member for a few hours at a time so that they may participate in normal activities such as shopping, religious worship, school and civic meetings, etc.
- 3. Homemaker Services provide assistance to families in performing essential household duties when family members or individuals are unable to manage such tasks effectively.
- 4. Transportation Services may be offered to families or individuals who need assistance in transporting themselves, their child or adult family member to regular day programs or appropriate activities.
- 5. In-Home Therapy services insure that the retarded family member will receive necessary treatment or therapy even when he or she is homebound.
- 6. Family Education/Training programs may be offered to assist parents of a retarded child or adult, retarded individuals who are parents, spouses and siblings or other family members in dealing with a family member who is mentally retarded.
- 7. Recreation and Leisure-Time Services/Opportunities may be provided to allow a retarded person to experience normative community leisure-time activities and increase his/her ability to participate more independently in similar activities.

The Family Resource Services Program therefore provides a variety of services/opportunities to the families of mentally retarded persons, as well as retarded persons themselves. For the family, FRS aims to provide adequate resources within the community to enable that family to maintain the retarded person at home with minimal stress or disruption to the family unit. For the mentally retarded individual, the program has as its purpose to provide adequate resources within the community to enable him/her to remain in a family context in a community setting, thus leading as normative a life as possible.

Further information about the Family Resource Services Program may be obtained from the local County Mental Health/Mental Retardation Office or from the DPW Regional Commissioners of Mental Retardation in Philadelphia, Pittsburgh, Scranton, and Camp Hill.

MARK YOUR CALENDAR

February 4, 8, 1976

American Physical Therapy Association Coordinated Section Meeting

Washington, D.C. Contact: APTA 1156 15th Street N.W. Washington, D.C. 20005

February 14, 1976

Steering Committee Meeting Coalition for the Handicapped Consumer Group

Contact:

George Brenyo Open Doors for the Handicapped Pittsburgh, Pennsylvania

February 17 and 18, 1976

Orientation Conference on the President's White House Conference on Handicapped Individuals, Arlington, Va.

February 18, 1976

Governor's Committee for the Physically Handicapped Committee Meeting

February 19, 1976

State Task Force on Right to Education Meeting Chester County Child Development Center Coatesville, Pa.

March 14, 15, 16, 17, 1976

Pennsylvania Recreation & Park Conference Seven Springs Mountain Resort Contact:

> Mt. Lebanon Parks & Recreation Department, 710 Washington Road, Pittsburgh, Penna. 15228

March 17, 1976

Governor's Committee for the Physically Handicapped Committee Meeting

February 21, 1976

Adult Conference on Vocational Education for the Handicapped - Host Inn, Harrisburg, Pa. – Contact: Mr. Wayne Grubb, Pa. Dept. of Education, Harrisburg, Pa.

March 18, 1976

State Task Force on Right of Education Meeting 123 Forster Street Harrisburg, Pa. 17102

February 27, 1976

Planning Committee Meeting - Governor's Conference on Handicapped Individuals Contact: Carl Odhner

Good Sheperd Home Allentown, Pa.

March 2-6, 1976

American Camping Association Philadelphia, Pa. Contact: Dr. Jerry Elliot Pennsylvania State University

March 15-17, 1976

National Health Conference

Philadelphia, Pa.

Contact: Dr. Leonard Bachman Pa. Department of Health

March 26, 27, 28, 1976

United Cerebral Palsy 1976 Annual Conference Pittsburgh Hilton Pittsburgh, Pa.

National committees scheduled to meet in connection with the conference, such as Finance Committee, will meet the preceding day, Thursday, March 25th.

April 4-7, 1976

Pa. Conference on the Aging Hershey Convention Center Hershey, Pa.

Contact:

Mr. Daniel Schulder Governor's Office of Human Resources April 25-27, 1976

Pa. Rehabilitation Conference Valley Forge, Pa.

Contact:

John Hagen Bureau of Vocational Education Department of Education

April 28-30, 1976

President's Committee on employment of the Handicapped
Washington, D.C.
Contact: John McGrath
Bureau of Vocational Education
Department of Education

May 3-7, 1976

Pennsylvania Easter Seal Society Conference

June 1-5, 1976 AAMD Conference Chicago, Illinois

June 13-17, 1976

National Conference on Social Welfare Washington, D.C.

June 16-19, 1976 PARC State Convention Downingtown, Pa.

June 20-23, 1976

United Cerebral Palsy Family Conference Slippery Rock State College Slippery Rock, Pa.

June 27-29, 1976 United Cerebral Palsy Spring Adult Association Conference Hershey, Pa.

December 1976

White House Conference on Handicapped Individuals
Washington, D.C.

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